

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 3  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Our Principles PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00603621		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;"><input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on</span>			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div> / <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div> / <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div></div> </div>		
Full Name of Payee <b>Content Creative Media, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">03</div></div> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">05</div></div> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">2016</div></div> </div>		
Mailing Address 3380 Tremont Road Suite 290			Amount <div style="border: 1px solid black; width: 100%; text-align: right; padding-right: 5px;">45750.00</div>		
City State Zip Code Columbus OH 43221		Transaction ID : SE.4856 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div> / <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div> / <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div></div> </div>			
Purpose of Expenditure Media placement		Category/ Type			
Name of Federal Candidate Donald J. Trump			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; width: 100%; text-align: right; padding-right: 5px;">0.00</div>		
			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>		
			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

  

Full Name of Payee <b>Content Creative Media, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">03</div></div> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">05</div></div> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">2016</div></div> </div>		
Mailing Address 3380 Tremont Road Suite 290			Amount <div style="border: 1px solid black; width: 100%; text-align: right; padding-right: 5px;">411750.00</div>		
City State Zip Code Columbus OH 43221		Transaction ID : SE.4858 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div> / <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div> / <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div></div> </div>			
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			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>		
			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; width: 100%; text-align: right; padding-right: 5px;">457500.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; width: 100%; text-align: right; padding-right: 5px;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; width: 100%; text-align: right; padding-right: 5px;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

\_\_\_\_\_  
Signature

Jamie Jodoin

[Electronically Filed]

Date

03

05

2016